

COMMONWEALTH OF KENTUCKY
REQUEST TO INSPECT PUBLIC RECORDS
RE: KRS CH. 61

REQUEST

DATE: _____

TO: _____
Name of State Agency

Public files in Regional Offices are not necessarily complete. Complete public files may be examined at the appropriate central office in Frankfort, Ky.

1. I request to inspect the following document(s): _____

2. Number of copies of each document requested @ 10 cents a page: _____

3. Enclosed \$ _____ Check ☐ Money Order ☐ Cash ☐

4. _____
Signature

Company

Address Phone

5. Is requested information from a database or geographic information system: Yes ☐ No ☐

6. For commercial use: Yes ☐ No ☐

7. If the answer to questions 5 & 6 is yes, the commercial purpose for which the requested information shall be used to: _____

I hereby certify that the information set forth in item 7 is true and correct to the best of my knowledge

Signature

DISPOSITION

8. The following disposition was made of the above request: _____

9. _____
Signature of Custodian

Agency

PLEASE MAIL OR FAX TO
Ky. NREPC, Division of Water
KPDES Branch
14 Reilly Rd., Frankfort Office Park
Frankfort, KY 40601
FAX (502) 564-5105